

ESTATE BOARD	FORM	REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES CHECK APPROPRIATE BOXES—PLEASE TYPE OR PRINT IN BLACK INK Quarterly Report: (Check one:) 1 st 2 nd 3 rd 4 th			FOR OFFICE USE ONLY TATE DO A RO GE SELECTIONS CHOOLED CAPIES	
THE STATE OF THE S	D-2	(Check one:) 1st ✓ 2nd 3rd 4th Final Report (Fund balance on Line E must be \$0) Amendment of the Report Indicated Above				
ull name and complete mailing address of Political Committee:				CHECK FOR ADDRESS CHANGE	COMMITTER 10 B	
People to Elect Erica Green 7061 W. North Ave. #244 Dak Park, IL 60302 -mail address: Erica@ericalgreen.com					34059-02	
	``			HECK FOR E-MAIL ADDRESS CHANGE ALL POLITICAL COMMITTE	ES DETURNITO	
REPORTING PERIOD CASH AVA OF REPOR		AVAILABLE AT BEGINNII PORTING PERIOD: OO	NG	STATE BOARD OF ELECTIONS 2329 S MacARTHUR BLVD OR	STATE BOARD OF ELECTIONS JAMES R THOMPSON CENTER 100 W RANDOLPH, STE 14-100 CHICAGO, IL 60601-3232	
Y			/A)	SPRINGFIELD, IL 62704-4503		
ROM	THRU Repeat this amount in SECTION D, Line (A) SECTION A — RECEIPTS				(PENDITURES	
1. Individual Contributions				6. Transfers Out		
a. Itemized (from Schedule A):		A): \$	_(1a)	a. Itemized (from Schedule B):	\$	(6a)
b. Not-Itemized:		\$	_(1b)	b. Not-Itemized:	\$	(6b)
2. Transfers In				7. Loans Made		
a. Itemizeo	d (from Schedule A	A): \$	_(2a)	a. Itemized (from Schedule B):	\$	
b. Not-Iten	nized:	\$	_(2b)	b. Not-Itemized:	\$	(7b)
3. Loans Received			8. Expenditures	<u>_</u>	(0.5)	
a. Itemized (from Schedule A):		A): \$	_(3a)	a. Itemized (from Schedule B):b. Not-Itemized	\$	(8a) (8b)
b. Not-Itemized \$ (3b)			9. Independent Expenditures	۶	(ou)	
4. Other Receip	pts d (from Schedule /	A): \$	(4a)	a. Itemized (from Schedule B-9	9): \$	(9a)
b. Not-Itemized		\$	(4b)	b. Not-Itemized	\$	
TOTAL RECEIPTS (1a thru 4b)		\$ 0.0	_(TR)	TOTAL EXPENDITURES (6a thru	9b)\$	(TE)
**************************************				**************************************		
a. Itemized (from Schedule I):): \$	_(5a)	10. a. Itemized (from Schedule C):	\$	(10a)
b. Not-Itemized		\$	_(5b)	b. Not-Itemized	\$	(10b)
TOTAL IN-KIND (5a + 5b)		\$ 0.0	_(TI)	TOTAL DEBTS & OBLIGATIONS	\$ <u>0.0</u>	
*******	******	******	****	**************************************		*****
Name and address of person submitting this report <u>if other than</u> the committee's Chair or Treasurer:				Cash available at beginning reporting perio		(A)
				Total Receipts from Section A (T	'R): \$ ⁰	(B)
				Total cash (A) plus ((C)
				Total Expenditures from Section B (T		(D)
				Funds available at close reporting period (C minus D	of \$7.00	(E)
		···		Investments total (if applicab	le): \$	(F)

VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND UP TO \$5000.

THIS FORM MAY BE REPRODUCED

January 10, 2022